SERFF Tracking Number:
 UNAM-127023285
 State:
 Arkansas

 Filing Company:
 Constitution Life Insurance Company
 State Tracking Number:
 47927

Company Tracking Number: CL-HI-PRES-L 1-11 AR

TOI: H14I Individual Health - Hospital Indemnity Sub-TOI: H14I.000 Health - Hospital Indemnity

Product Name: HI4 Presentation

Project Name/Number: /

Filing at a Glance

Company: Constitution Life Insurance Company

Product Name: HI4 Presentation SERFF Tr Num: UNAM-127023285 State: Arkansas TOI: H14I Individual Health - Hospital Indemnity SERFF Status: Closed-Approved State Tr Num: 47927

Closed

Sub-TOI: H14I.000 Health - Hospital Indemnity Co Tr Num: CL-HI-PRES-L 1-11 ARState Status: Approved-Closed

Filing Type: Form Reviewer(s): Rosalind Minor

Author: Holly Parenti Disposition Date: 02/21/2011

Date Submitted: 02/08/2011 Disposition Status: Approved-

Closed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: Status of Filing in Domicile:
Project Number: Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Individual

Explanation for Combination/Other: Market Type: Individual Submission Type: New Submission Individual Market Type:

Overall Rate Impact: Filing Status Changed: 02/21/2011
State Status Changed: 02/21/2011

Deemer Date: Created By: Holly Parenti

Submitted By: Holly Parenti Corresponding Filing Tracking Number:

Filing Description:

Constitution Life Insurance Company NAIC# 62359

Advertising Submission-

Form(s)

CL-HI-PRES-L 1-11 AR Hospital Indemnity Insurance Presentation

Dear Sir or Madam:

We submit the above form for your review and approval. This advertising material will be used for our Hospital Indemnity Insurance forms approved by your state on April 16, 2009.

Company Tracking Number: CL-HI-PRES-L 1-11 AR

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We consider this advertisement an invitation to inquire and will use it to obtain leads for our Hospital Indementy Insurance approved by your Department.

If additional information is needed, please contact me at 800-538-1053 ext. 8531 or hparenti@uafc.com

Company and Contact

Filing Contact Information

Holly Parenti, hparenti@uafc.com

P.O. Box 958465 407-628-1776 [Phone] 8531 [Ext]

Lake Mary, FL 32795-8465

Filing Company Information

Constitution Life Insurance Company CoCode: 62359 State of Domicile: Texas

1001 Heathrow Park Lane Group Code: 953 Company Type:
Suite 5001 Group Name: State ID Number:

Lake Mary, FL 32746 FEIN Number: 36-1824600

(407) 995-8000 ext. [Phone]

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No

Fee Explanation: \$50.00 per ad (1 ad)

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Constitution Life Insurance Company \$50.00 02/08/2011 44493548

Company Tracking Number: CL-HI-PRES-L 1-11 AR

TOI: H14I Individual Health - Hospital Indemnity Sub-TOI: H14I.000 Health - Hospital Indemnity

Product Name: HI4 Presentation

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Rosalind Minor	02/21/2011	02/21/2011

Company Tracking Number: CL-HI-PRES-L 1-11 AR

TOI: H14I Individual Health - Hospital Indemnity Sub-TOI: H14I.000 Health - Hospital Indemnity

Product Name: HI4 Presentation

Project Name/Number: /

Disposition

Disposition Date: 02/21/2011

Implementation Date: Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Company Tracking Number: CL-HI-PRES-L 1-11 AR

TOI: H14I Individual Health - Hospital Indemnity Sub-TOI: H14I.000 Health - Hospital Indemnity

Product Name: HI4 Presentation

Project Name/Number: /

Schedule	Schedule Item	Schedule Item Status Public Access
Supporting Document	Flesch Certification	Approved-Closed Yes
Supporting Document	Application	Approved-Closed Yes
Supporting Document	Health - Actuarial Justification	Approved-Closed Yes
Supporting Document	Outline of Coverage	Approved-Closed Yes
Form	Hospital Indemnity Prestentation	Approved-Closed Yes

Company Tracking Number: CL-HI-PRES-L 1-11 AR

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Product Name: HI4 Presentation

Project Name/Number: /

Form Schedule

Lead Form Number: CL-HI-PRES-L 1-11 AR

Schedule Form Form Type Form Name **Action Action Specific** Readability Attachment Item Number Data **Status** Approved- CL-HI-Advertising Hospital Indemnity Initial CL-HI-PRES-Closed Prestentation L 1-11 AR.pdf PRES-L 1-

02/21/2011 11 AR





LIMITED BENEFIT Hospital Indemnity Insurance Policy

from Constitution Life Insurance Company, a member of the Universal American family of companies.



Hospital Indemnity Insurance

People save for vacations, children's education, purchasing a home...but trips to the hospital are seldom anticipated.

The Hospital Indemnity policy from Constitution Life can help you plan for the unexpected.

- Hospital stays almost always result in additional, unplanned expenses.
- Many of these expenses are not covered by your traditional health insurance.
- The benefits on the hospital confinement policy are paid directly to you, the policyholder.





Facts to Consider*

- The average charge on a typical bill from a United States community hospital was \$29,046 in 2008.
- Hospital charges have risen an average of 8.9% per year since 1997.
- The average length of stay in a United States hospital was 4.6 days in 2008.

*AHRQ net. Agency for Healthcare Research and Quality (2008)





Hospital Indemnity Insurance

Money when you need it the most!

Use the money for additional expenses such as:

- 1. At-home recovery
- 2. Physician's co-pays or excess charges
- 3. Prescription costs
- 4. Skilled nursing co-pays
- 5. Pay insurance premiums
- 6. Other unexpected or unplanned expenses







About the Plan

- Daily benefit of up to \$600 per day available in \$50 increments.*
- Policy may be issued for individual, individual plus spouse, individual plus child(ren), or family coverage.
- Issue ages 18-84 for individuals and spouse with children, issue ages for children coverage may vary by state.
- Guaranteed renewable for life.
- Premiums do not increase due to age.**
- Benefit levels and riders selected provide same coverage for each insured, except each child receives 50% of daily hospital benefit and lump sum hospitalization benefit selected.
- Daily benefit pays for up to 31 days when hospitalized due to a covered injury or sickness.***
- · Benefit restores after 60 consecutive days of not being hospitalized
- Underwritten based on yes/no questions on the application, medical exams are not required
- Pays in addition to other coverage



^{*\$100} minimum daily benefit in Virginia & Maine

^{**}Premiums may be changed if necessary, but only if the premiums are changed for all policyholders in the same rating class

^{***}Hospital confinement must be recommended by a physician



Optional Riders*

Lump Sum Hospital Confinement Rider

 Pays up to \$1000 in increments of \$250 (restores after 60 consecutive days of not being hospitalized).

Durable Medical Equipment Rider

• Pays 30% of first \$1000 of actual charges per calendar year for a wheelchair, walker, cane, or similar piece of equipment.

Ambulance Rider

 Pays up to \$200 per service, one time during any period of hospital confinement.

Accidental Death and Dismemberment Rider

 Pays up to \$10,000 in increments of \$5000 for dismemberment or death due to an accident.

AMERICAN



Exclusions & Limitations

- Coverage is not provided for any benefits other than the fixed indemnity for hospital confinement and any optional benefits selected at time of application.
- Policy, optional Lump Sum, Durable Medical & Ambulance riders will not cover loss that (1) starts within 6 or 12 months (varies by state) after effective date; (2) is caused by a Pre-Existing Condition.
- Additionally, the optional AD&D Rider does not provide coverage for any sickness or disease.



Hospital Indemnity Insurance

You can select the plan that best serves your needs, choose the daily benefit level and appropriate riders, and enjoy the peace of mind knowing you are prepared for the unexpected!



A Healthy Collaboration

Policy Series CL-HI4 (08)

This is a solicitation for insurance. A licensed agent may contact you.

Universal American (NYSE: UAM), through our family of healthcare companies, provides health benefits to nearly two million people with Medicare every day.* We are dedicated to working collaboratively with healthcare professionals in order to improve the health and well-being of our members. *2009 Annual Report; April 2010

www.UniversalAmerican.com

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Product Name: HI4 Presentation

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Supporting Document Schedules

Item Status: Status

Date:

Bypassed - Item: Flesch Certification Approved-Closed 02/21/2011

Bypass Reason: N/A

Comments:

Item Status: Status

Date:

Bypassed - Item: Application Approved-Closed 02/21/2011

Bypass Reason: N/A

Comments:

Item Status: Status

Date:

Bypassed - Item: Health - Actuarial Justification Approved-Closed 02/21/2011

Bypass Reason: N/A

Comments:

Item Status: Status

Date:

Bypassed - Item: Outline of Coverage Approved-Closed 02/21/2011

Bypass Reason: N/A

Comments: